

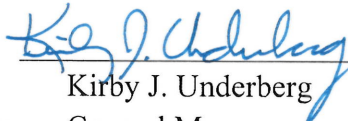
Certification of Officer as to Compliance with Applicable Service Quality Standards and Consumer Protection Rules

(010) Study Area Code	429790
(015) Study Area Name	MISSOURI RSA NO. 5 PARTNERSHIP
(020) Program Year	2017
(030) Contact Name	Tina Jordan
(035) Contact Telephone No	660-395-9682
(039) Contact Email Address	tjordan@charitonvalley.com

CERTIFICATION

Missouri RSA 5 Partnership d/b/a Chariton Valley Wireless Services complies with Red Flag Rules, CPNI, and the Fair Credit Reporting Act, the Cellular Telecommunications and Internet Association's Consumer Code for Wireless Service, and seeks to protect our customer's privacy while providing them with high quality, state-of-the-art telecommunications products and services. I certify that I am an officer of the reporting carrier; my responsibilities include ensuring compliance with the applicable service quality standards as well as the consumer protection rules; and, to the best of my knowledge, the carrier is in compliance with applicable service quality standards and consumer protection rules pursuant to 47 C.F. R. 54.313 and 54.422.

Signature of Authorized Officer



Date 6/24/16

Printed Name of Authorized Officer

Kirby J. Underberg

Title or position of Authorized Officer

General Manager

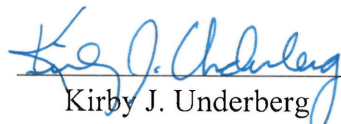
(Persons making willful false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. 1001.)

Certification of Officer as to Compliance with Functionality in Emergency Situations

(010) Study Area Code	429790
(015) Study Area Name	MISSOURI RSA NO. 5 PARTNERSHIP
(020) Program Year	2017
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CERTIFICATION

Missouri RSA 5 Partnership d/b/a Chariton Valley Wireless Services (CVWS) provides a minimum of 8 hours of battery back-up power at each site, has added generators to new sites to avoid service outages during commercial power failure, has access to two 33kw portable trailer generators, is able to reroute traffic around damaged facilities, and is capable of managing traffic spikes resulting from emergency situations. I certify that I am an officer of the reporting carrier; my responsibilities include ensuring functionality in emergency situations; and, to the best of my knowledge, the carrier is in compliance with the ability to function in emergency situations pursuant to 47 C.F. R. 54.313 and 54.422.

Signature of Authorized Officer**Printed Name of Authorized Officer****Title or position of Authorized Officer**
Kirby J. Underberg
General Manager**Date**6/24/2016

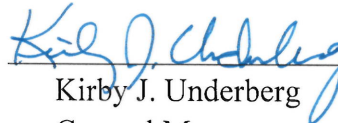
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Certification of Officer as to Compliance with Voice Services Rate Comparability

(010) Study Area Code 429790
(015) Study Area Name MISSOURI RSA NO. 5 PARTNERSHIP
(020) Program Year 2017
(030) Contact Name Tina Jordan
(035) Contact Telephone No 660-395-9682
(039) Contact Email Address tjordan@charitonvalley.com

CERTIFICATION

Missouri RSA 5 Partnership d/b/a Chariton Valley Wireless Services (Chariton Valley) operates in the state of Missouri and has a \$30 call plan that applies to their entire study area, no more than two standard deviations above the applicable national average urban rate for voice services as published by the Wireline Competition Bureau April 5, 2016 (\$41.07.) I certify that I am an officer of the reporting carrier; my responsibilities include ensuring compliance with the voice services rate comparability; and, to the best of my knowledge, the carrier is in compliance with rules pursuant to 47 C.F. R. 54.313.

Signature of Authorized Officer**Date** 6/24/16**Printed Name of Authorized Officer**

Kirby J. Underberg

Title or position of Authorized Officer

General Manager

(Persons making willful false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. 1001.)



Wireless Lifeline Plan

Lifeline Plan \$20*/Month

- Standard phone usage with ability for customers to make and receive calls within the **Chariton Valley service area**.
- Unlimited airtime (inbound and outbound calling) in the **Chariton Valley service area**.
- Toll is restricted to within the **Chariton Valley service area**.
- Roaming is not allowed.
- \$9.25 Low Income Benefit applied to monthly invoice.
- Activation fee \$30.
- 911 Calling is available in all areas where technology compatible service is available.
- Taxes and fees apply.

Wireline Lifeline Plan

Lifeline Plan

Telephone Local Service \$14.00*/Month
Telecom Local Service \$18.75*/Month

- \$15.75 Low Income Benefit applied to monthly invoice.
- Local Service Charges apply.
- 911 calling
- Toll Restricted
- Long Distance available for an additional fee.
- Service order and connection fees apply.

* This rate is prior to the Lifeline program credit. Rates shown are residential only.

Customer Service Centers

Brookfield
201 N. Main

Macon
1206 N. Missouri

Moberly
1320 Hwy. 24 E.

Salisbury
302 N. Weber

Bucklin
606 Oak Street

Agent Location
Shelbina
Tim's Home Center
201 Fairgrounds Rd



660-395-9000 • 800-769-8731
www.cvalley.net

10.6.14

Lifeline

Low Income Telephone
Benefit Program





Chariton Valley
is your "Lifeline" to reliable phone
service at a discounted price!



*Being a lifeline customer does not protect you from being disconnected if you fail to pay your telephone bill. Normal collection practices apply.

What is Lifeline?

Lifeline assistance provides discounted monthly basic service. Lifeline is available on one telephone service per household, whether wireline or wireless.

Who is eligible for Lifeline assistance?

You are eligible if you participate in any of the following programs:

- MO Healthnet (Medicaid)
- Food Stamps
- Supplemental Security Income (SSI)
- Federal Public Housing Assistance or Section 8
- Low Income Home Energy Assistance Program (LIHEAP)
- Temporary Assistance for Needy Families (TANF)
- National School "Free Lunch" Program
- 135% of Federal Poverty Level

If you don't qualify for Lifeline Wireline only customers may be eligible for a \$3.50 monthly benefit under the Disabled Program:

- Veteran Administration Disability Benefits Program
- State Blind Pension
- State Aid to Blind Persons
- State Supplemental Disability Assistance Payments Administered by the Family Support Division Federal
- Federal Supplemental Security Income

You may not combine Lifeline and Disabled benefits.



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Are there any restrictions?

Lifeline benefits are limited to one discount per household, either wireless or wireline, but not both. You must provide proof of eligibility before the service can be activated.

How do I apply for Lifeline benefits?

Applications are available at any of our customer service locations, as well as at our website www.cvalley.net under the telephone section.

When does the discount end?

When you no longer receive benefits from any of the programs that made you eligible for the Lifeline Program.

What do I do when my current situation changes?

Notify your local customer service office or call 660-395-9000 immediately and inform them of the changes to determine if you are still eligible.

Do I need to apply each year?

Yes, annual recertification is required to continue benefits. You will be notified when and how to recertify.





Chariton Valley Wireless Services Missouri Application for the Lifeline Program

Consumers meeting certain eligibility criteria are able to participate in the Lifeline program and receive discounted voice telephony service. Lifeline service offers a monthly discount of \$9.25. To apply complete this form and also submit **proof of eligibility**.

Eligibility Criteria for the Lifeline Program
<input type="checkbox"/> MO HealthNet (f/k/a Medicaid) <input type="checkbox"/> Supplemental Nutrition Assistance (Food Stamps) <input type="checkbox"/> Supplemental Security Income <input type="checkbox"/> Low-Income Home Energy Assistance (LIHEAP) <input type="checkbox"/> Federal Public Housing Assistance (Section 8) <input type="checkbox"/> National School Free Lunch Program <input type="checkbox"/> Temporary Assistance for Needy Families (TANF) <input type="checkbox"/> 135% of the Federal Poverty Level <i>(See next page for income threshold requirements)</i>

Applicant's Full Name :	Birth Date:	Social Security # (last 4 digits):	DCN:*
Name on Voice Service Account (If different from Applicant):		Customer Contact Telephone Number:	
Customer's Full Residential Service Address (no P.O. Boxes): Street: City, Town, Zip:		Is this address a temporary address? Yes / No <i>(circle the appropriate response)</i> (If "yes" then must verify address every 90 days.)	
Is this address also my billing address? <input type="checkbox"/> Yes <input type="checkbox"/> No <i>(If "no" please provide billing address):</i>			

**This number is assigned to program participants of MO HealthNet, LIHEAP, Food Stamps and TANF.*

I understand the following obligations and provisions about the Lifeline program:

- The Lifeline program is a government benefit program and that willfully making false statements to obtain the benefit can result in fines, imprisonment, de-enrollment or being barred from the program.
- Only one Lifeline service is available per household.
- A household is defined, for purposes of the Lifeline program, as any individual or group of individuals who live together at the same address and share income and expenses.
- A household is not permitted to receive Lifeline benefits from multiple providers.
- Violation of the one-per-household limitation constitutes a violation of rules and will result in the subscriber's de-enrollment from the program.
- Lifeline is a non-transferable benefit and the subscriber may not transfer his or her benefit to any other person.
- I will be de-enrolled from the Lifeline program and my service deactivated if my service fails to be used for a 60-day time period. Using the service includes completion of an outbound call, purchase of additional usage, or answering an incoming call from a party not affiliated with this company.


I CERTIFY UNDER PENALTY OF PERJURY EACH OF THE FOLLOWING:

- I meet the eligibility criteria for the Lifeline program.
- I will provide notification to my voice service provider within 30 days if for any reasons I no longer satisfy the criteria for receiving Lifeline including, as relevant, if I no longer meet the income-based or program-based criteria for receiving Lifeline support, I receive more than one Lifeline benefit, or another member of my household is receiving a Lifeline benefit.
- If I move to a new address I will provide that new address to my voice service provider within 30 days.
- If I have a temporary residential address then I will be required to verify my address with my voice service provider every 90 days.
- My household will receive only one Lifeline service and, to the best of my knowledge, my household is not already receiving a Lifeline service.
- I acknowledge the obligation to re-certify my continued eligibility for Lifeline benefits at any time and failure to re-certify my continued eligibility will result in de-enrollment and the termination of Lifeline benefits.
- I consent to providing my name, telephone number and address to the Universal Service Administrative Company for the purpose of verifying I do not receive more than one Lifeline benefit. I also consent to sharing my account information with the Federal Communications Commission and Missouri Public Service Commission who oversee and administer the Lifeline program.

_____ I certify I have _____ individuals in my household.
(Initial and complete only if qualifying under income threshold.)

The information supplied on this form is true and correct.

I acknowledge providing false or fraudulent information to receive Lifeline benefits is punishable by law.

Signature of Customer

Date

Submit a completed signed form and proof of eligibility.

Annual Income Thresholds for Meeting 135% of Federal Poverty Level (Based on Household Size)								
1	2	3	4	5	6	7	8	Each add'l person
\$15,890	\$21,506	\$27,122	\$32,738	\$38,354	\$43,970	\$49,586	\$55,202	+ \$5,616/person

Acceptable documentation for meeting the criteria of 135% of the federal poverty level includes: a copy of prior year's state or federal tax return; paycheck stub (three consecutive months); a statement of benefits for Social Security, Veterans Administration, retirement/pension or Unemployment/Workmen's Compensation; or other legal documents showing current income (e.g. divorce decree, child support award). Any documentation must cover a fully year or three consecutive months within the previous twelve months.

Company Use Only:

I hereby attest the applicant presented acceptable proof of eligibility:

Print name of company official

Signature

Date